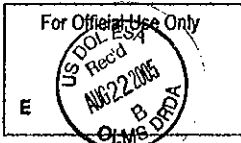


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>15019</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Tom</u> <u>I</u> <u>Csekey</u> P.O. Box, Bldg., Room No., if any Street <u>2428-19th Avenue</u> City <u>Oakland</u> State <u>California</u> ZIP Code + 4 <u>94606</u>	4. Name, file number, and address of labor organization. Name <u>SEIU Local 1877</u> Labor Organization File Number <u>521501</u> P.O. Box, Building and Room Number, if any Street <u>1247 W 7th Street</u> City <u>Los Angeles</u> State <u>California</u> ZIP Code + 4 <u>90017</u>
5. Position in labor organization. <u>1st Vice-President</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>General Employees Trust Fund</u> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <u>642 Harrison Street, Ste., 306</u> City <u>San Francisco</u> State <u>California</u> ZIP Code + 4 <u>94107-1351</u>	7.a. Nature of Interest, Transaction, or Income. <u>Dinner at Annual Trust meeting July 25, 2004</u> 7.b. Amount. <u>\$114</u>

Signature

16. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>[Signature]</u>	On <u>8/12/05</u> <u>570-534-8439</u> Date Telephone Number

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

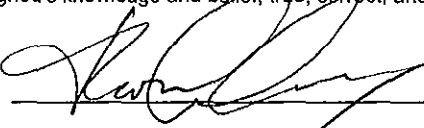
1. File Number U - 15019	2. Fiscal Year Covered From: 1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name Tom I Csekey P.O. Box, Bldg., Room No., if any Street 2428-19th Avenue City Oakland State California ZIP Code + 4 94606	4. Name, file number, and address of labor organization. Name SEIU Local 1877 Labor Organization File Number 521501 P.O. Box, Building and Room Number, if any Street 1247 w. 7th Street City Los Angeles State California ZIP Code + 4 90017
5. Position in labor organization. 1st Vice President	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name General Employees Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 642 Harrison St., Ste. 306 City San Francisco State California ZIP Code + 4 94107-1351	7. a. Nature of Interest, Transaction, or Income. Breakfast, Lunch, and Paid Parking at Trustee meeting 1/28/04 7. b. Amount. \$27

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed  On 8/12/2005 510-534-8439
Date Telephone Number

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

7.a. Nature of Interest, Transaction, or Income.

Breakfast, Lunch, and paid parking at Trustee meeting 2/24/2004

7.b. Amount.

\$28

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name General Employee Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

7.a. Nature of Interest, Transaction, or Income.

Breakfast, lunch, and paid parking at Trustee meeting 4/27/2004

7.b. Amount.

\$27

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste. 306

City San Francisco

State California ZIP Code + 4 94107-1351

7.a. Nature of Interest, Transaction, or Income.

Reimbursed expenses for IFEBP San Diego '03 Conference 11/2003

7.b. Amount.

\$69

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

7.a. Nature of Interest, Transaction, or Income.

IFEBP 2004 Conference Expense Advance

7.b. Amount.

\$2,500

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

7.a. Nature of Interest, Transaction, or Income.

Breakfast at Annual Trust meeting July 26, 2004

7.b. Amount.

\$45

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

7.a. Nature of Interest, Transaction, or Income.

Breakfast and Lunch at Annual Trust meeting July 27, 2004

7.b. Amount.

\$69

Name of Person Filing Tom Csekey	File Number U-
----------------------------------	----------------

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name General Employees Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 642 Harrison Street, Ste., 306 City San Francisco State California ZIP Code + 4 94107-1351	7.a. Nature of Interest, Transaction, or Income. Hotel Room and Misc. Expenses at Annual Trust meeting July 25 - July 27, 2004 7.b. Amount. <div align="right">\$579</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Name of Person Filing Tom Csekey	File Number U-
----------------------------------	----------------

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name McMorgan & Company</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street One Bush Street, Suite 800</p> <p>City San Francisco</p> <p>State California ZIP Code + 4 94104</p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name General Employees Trust Fund</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 642 Harrison Street, Ste., 306</p> <p>City San Francisco</p> <p>State California ZIP Code + 4 94107-1351</p>	<p>11.a. Nature of such dealing.</p> <p>Paid for part of the dinner at Annual Trust meeting July 26, 2004</p> <p>11.b. Approximate dollar value of such dealing. \$57</p>
	<p>12.a. Nature of interest held or income received.</p> <p>12.b. Amount.</p>

Name of Person Filing Tom Csekey

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Union Labor Life

Trade Name, if any: ULLICO

P.O. Box, Bldg., Room No., if any

Street 180 Montgomery

City San Francisco

State California

ZIP Code + 4 94104

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste. 306

City San Francisco

State California

ZIP Code + 4 94107-1351

11.a. Nature of such dealing.

Reception at Annual Trust meeting July 25, 2004

11.b. Approximate dollar value of such dealing.

\$93

12.a. Nature of interest held or income received.

12.b. Amount.

Name of Person Filing Tom Csekey

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). Name <u>Pacific Union Dental</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>1390 Willow Pass Road</u> City <u>Concord</u> State <u>California</u> ZIP Code + 4 <u>94520</u>	9. Business deals with: <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name <u>General Employees Trust Fund</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>642 Harrison Street, Ste., 306</u> City <u>San Francisco</u> State <u>California</u> ZIP Code + 4 <u>94107-1351</u>	11.a. Nature of such dealing. <u>I was hosted to a dinner and a NBA Basketball game on January 15, 2004</u> 11.b. Approximate dollar value of such dealing. <u>\$313</u>
	12.a. Nature of interest held or income received. <u></u> 12.b. Amount. <u></u>

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Pacific Union Dental

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1390 Willow Pass Road

City Concord

State California ZIP Code + 4 94250

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

11.a. Nature of such dealing.

Hosted to a Dinner and NBA basketball game on December 27, 2004

11.b. Approximate dollar value of such dealing.

\$125

12.a. Nature of interest held or income received.

12.b. Amount.

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Associated Third Party Administrators

Trade Name, if any: ATPA

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

11.a. Nature of such dealing.

Dinner during IFEBP Conference in New Orleans
11/29/2004

11.b. Approximate dollar value of such dealing.

\$115

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Associated Third Party Administrators

Trade Name, if any: ATPA

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste. 306

City San Francisco

State California ZIP Code + 4 94107-1351

9. Business deals with:

a. Labor Organization

☒ b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name General Employees Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 642 Harrison Street, Ste., 306

City San Francisco

State California ZIP Code + 4 94107-1351

11.a. Nature of such dealing.

Dinner at IFEBP Conference 2004 in New Orleans
12/03/2005

11.b. Approximate dollar value of such dealing.

\$130

12.a. Nature of interest held or income received.

12.b. Amount.